

TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application No.	09/895,744
		Filing Date	June 29, 2001
		First Named Inventor	Regis J. Crinon
		Art Unit	2623
		Examiner Name	Son P. Huynh
Total Number of Pages In This Submission	15	Attorney Docket Number	42390P11553

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ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> -Fax Cover Sheet (1 pg) </div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Thomas M. Coester, Reg. No. 39,637 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	<i>Thomas Coester</i>
Date	July 11, 2006

CERTIFICATE OF MAILING/TRANSMISSION			
I hereby certify that this correspondence is being transmitted via facsimile on the date shown below to the United States Patent and Trademark Office.			
Typed or printed name	Susan M. Barrette	Date	July 11, 2006
Signature	<i>Susan M. Barrette</i>		

Based on PTO/SB/21 (09-04) as modified by Blakely, Sokoloff, Taylor & Zafman (w/r) 11/30/2005.
 SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

**FEE TRANSMITTAL
for FY 2005**

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$) 0.00

Complete if Known

Application Number 09/895,744

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Examiner Name Son P. Huynh

Art Unit 2623

Attorney Docket No. 42390p11553

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METHOD OF PAYMENT (check all that apply)
☐ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify):

☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayment of fee(s). ☐ Credit any overpayments
under 37 CFR §§ 1.16, 1.17, 1.13 and 1.20.
FEE CALCULATION**1. EXTRA CLAIM FEES**

	Extra Claims	Fee from below	Fee Paid
Total Claims	26 - 25 = 0	50.00	\$0.00
Independent Claims	7 - 7 = 0	200.00	\$0.00
Multiple Dependent			

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1202	50	2202	25	Claims in excess of 20
1201	200	2201	100	Independent claims in excess of 3
1203	280	2203	180	Multiple Dependent claim, if not paid
1204	790	2204	385	**Release independent claims over original patent
1205	300	2205	150	**Release claims in excess of 20 and over original patent

SUBTOTAL (1) (\$) 0.00

**or number previously paid, if greater. For Releases, see below

2. ADDITIONAL FEES

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1051	130	2051	65	Surcharge - late filing fee or oath
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet
2053	130	2053	130	Non-English specification
1251	120	2251	60	Extension for reply within first month
1252	450	2252	225	Extension for reply within second month
1253	1,020	2253	510	Extension for reply within third month
1254	1,680	2254	795	Extension for reply within fourth month
1255	2,160	2255	1,080	Extension for reply within fifth month
1401	500	2401	250	Notice of Appeal
1402	900	2402	250	Filing a brief in support of an appeal
1403	1,000	2403	500	Request for oral hearing
1451	1,510	2451	1,510	Petition to institute a public use proceeding
1460	130	2460	130	Petitions to the Commissioner
1807	50	1807	50	Processing fee under 37 CFR 1.17(g)
1806	180	1806	180	Submission of Information Disclosure Stmt
1809	790	1809	395	Filing a submission after final rejection (37 CFR § 1.129(a))
1810	790	2810	395	For each additional invention to be examined (37 CFR § 1.129(b))

Other fee (specify)

SUBTOTAL (2)

(\$)

Fee Paid

SUBMITTED BY

Name (Print/Type) Thomas M. Coester

Registration No. (Attorney/Agent)

39,637

Telephone

(310) 207-3800

Signature

Thomas Coester

Date

07/11/06

Based on FTO/SE/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wtr) 12/15/2004
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**FEE TRANSMITTAL
for FY 2005**

Patent fees are subject to annual revision

☐ Applicant claims small entity status. See 37 CFR 1.27.**TOTAL AMOUNT OF PAYMENT** (\$) 0.00

Complete if Known

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 First Named Inventor Regis J. Crinon
 Examiner Name Son P. Huynh
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 Attorney Docket No. 42390p11553

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☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. ☐ Credit any overpayments

FEE CALCULATION**1. EXTRA CLAIM FEES**

	Total Claims	Extra Claims	Fee from below	Fee Paid
Total Claims	26	26	0	\$0.00
Independent Claims	7	7	0	\$0.00
Multiple Dependent				

Large Entity	Small Entity	Fee Description
Fee Code (\$)	Fee Code (\$)	
1202 50	2202 25	Claims in excess of 20
1201 200	2201 100	independent claims in excess of 3
1203 350	2203 180	Multiple Dependent claim, if not paid
1204 790	2204 395	**Release independent claims over original patent
1205 300	2205 150	**Release claims in excess of 20 and over original patent

SUBTOTAL (1) (\$) 0.00

**or number previously paid, if greater. For Releases, see below

2. ADDITIONAL FEES

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1807 50	1807 50	Processing fee under 37 CFR 1.17(d)
1806 180	1806 180	Submission of Information Disclosure Sheet
1809 790	1809 395	Filing a submission after final rejection (37 CFR § 1.129(e))
1810 790	2810 395	For each additional invention to be examined (37 CFR § 1.129(b))

Other fee (specify):

SUBTOTAL (2)

(\$)

Fee Paid

SUBMITTED BY

Name (Print/Type) Thomas M. Coester Registration No. 39,637 Telephone (310) 207-3800
 Signature *Thomas Coester* Date 07/11/06

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Attorney Docket No.: 42P11553

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	
)	
Regis J. Crinon, et al.)	Examiner: Son P. Huynh
)	
Application No.: 09/895,744)	Art Group: 2623
)	
Filed: June 29, 2001)	
)	
For: TAILORING A BROADCAST SCHEDULE)	
BASED ON STORAGE AREA AND)	
CONSUMER INFORMATION)	

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AMENDMENT AND RESPONSE TO FINAL OFFICE ACTION

In response to the Final Office Action mailed May 30, 2006, in connection with the above referenced patent application, Applicants respectfully request entry of the following amendments and request reconsideration in view of the following remarks.